PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

35133

7590

05/12/2004

COZEN O'CONNOR, P.C. 1900 MARKET STREET PHILADELPHIA, PA 19103-3508 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

VIA EXPRESS MAIL LABEL NO. EV147593454US

Certificate of Mailing or Transmission

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name

(Signature)
(Date)

APPLICATION NO. 09/826,509

94/05/2001

FIRST NAMED INVENTOR

Karin Lehmann-Bruinsma

ATTORNEY DOCKET NO.

AREN-0207

CONFIRMATION NO.

7872

TITLE OF INVENTION: NON-ENDOGENOUS, CONSTITUTIVELY ACTIVATED KNOWN G PROTEIN-COUPLED RECEPTORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES	\$665	\$300	\$965	08/12/2004		
EXAM	MINER	ART UNIT	CLASS-SUBCLASS]			
Li, RUI	IXIANG	1646	435-007100	,			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Michael P. Straher

Cozen O'Connor

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Arena Pharmaceuticals, Inc.

San Diego, California

Please check the appropriate assignee category or c	categories (will not be printed on the patent);	☐ individual XXcorporation or other private group entity ☐ government	ent
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):		_
XIssue Fee	☐ A check in the amo	unt of the fee(s) is enclosed.	
X Publication Fee	☐ Payment by credit	eard. Form PTO-2038 is attached.	
Advance Order - # of Copies1	The Director is he Deposit Account Num	reby authorized by charge the required fee(s), or credit any overpayment, iber 50-1275 (enclose an extra copy of this form).	to

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

(Date)

(Authorized Signature)

(Date)

(Authorized Signature)

(Date)

(Authorized Signature)

(Date)

(Date)

(Date)

(NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone

NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

08/12/2004 SHASSEN2 00000053 501275 09826509

01 FC:2501 665.00 DG 02 FC:1504 300.00 DG 03 FC:8001 3.00 DG

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OIPE	X
AUG 1 0.200	A 1-07
PROTE TRADEM	0

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYME

(\$)	109
ŲΨ)	103

Complete if Known								
Application Number	09/826,509							
Filing Date	April 5, 2001							
First Named Inventor	Karin Lehmann-Bruinsma							
Examiner Name	R. Li							
Art Unit	1646							
Attorney Docket No.	AREN 17.US3.REG							

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)										
					3. ADDITIONAL FEES										
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order				Large	Entity	Small E	ntitu								
☑ Deposit Account:							_Jillan L	.nury							
						Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Pa	id			
Deposit Account		50-1275					İ		1051	130	2051	65	Surcharge - late filing fee or oath		\neg
Number					1052	50	2052	25	Surcharge - late provisional filing fee		┨.				
													or cover sheet.		
Deposit									1053	130	1053	130	Non-English specification		
Account Name	- 1 '	Cozen O'C	connor						1812	2,520	1812	2,520	For filing a request for reexamination		
Name The Director is authorized to: (check all that apply)						1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action					
☐ Charge fee(s☐ Charge any	ádditi	onal fee(s) dur	ing the pende	ency of th	is app			1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
Charge fee(s to the above-ide					e filing fe	e			1251	110	2251	55	Extension for reply within first month		
to the above-loc	enane			CULATION				_	1252	420	2252	210	Extension for reply within second month		
1. BASIC	FIL I	NG FEE	-						1253	950	2253	475	Extension for reply within third month		\neg
Large Entity	Sm	all Entity			_			l	1254	1,480	2254	740	Extension for reply within fourth month		
Fee Fee Code (\$)	Fee		<u> </u>	ee Descriptio	<u>n</u>	Fee	e Paid	- 1	1255	2,010	2255	1,005	Extension for reply within fifth month		7
1001 770	200		U	tility filing fee				1 I	1401	330	2401	165	Notice of Appeal		\neg
1002 340	200	2 170		esign filing fee	+			1	1402	330	2402	165	Filing a brief in support of an appeal		7
1003 530	200	3 265		ant filing fee		 		1	1403	290	2403	145	Request for oral hearing		
1004 770	200		R	eissue filing fe					1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1005 160 2005 80 Provisional filling fee		·	1452	110	2452	55	Petition to revive – unavoidable		1						
		SUBTO	TAL ((1)		(\$)	0	1	1453	1,330	2453	665	Petition to revive - unintentional		\neg
									1501	1,330	2501	665	Utility issue fee (or reissue)	665	
2. EXTRA CI	_AIM	FEES	FOR	UTILITY A	ND REIS	SSUE			1502	480	2502	240	Design issue fee		
					ee from		Fee		1503	640	2503	320	Plant issue fee		
Total Claims] -20 **	_	Claims t	pelow	1 = [Paid 0	1 I	1460	130	1460	130	Petitions to the Commissioner	130	7
Independent] =~				1 1	<u> </u>	1	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Claims		-3 **	= [□ × [] = [0		1806	180	1806	180	Submission of Information Disclosure Stmt		
Multiple Dependent Large Entity Small Entity							8021	40	8021	40	Recording each patent assignment per property (times number of properties)				
Fee Fee Code (\$)		Fee Code	Fee (\$)	Fee Descri	ption				1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	n	7
1202 18		2202	9	Claims in e	xcess of 2	20		- 1	1810	770	2810	385	For each additional invention to be		\dashv
1201 86		2201	43	Independer			ess of 3						examined (37 CFR § 1.129(b))		
1203 290		2203	145	Multiple de	pendent cl	laim, i	f not paid	ıl	1801	770	2801	385	Request for Continued Examination (RCE	٠	
1204 86		2204	43	** Reissue original pat		ent cla	ims over		1802	900	1802	900	Request for expedited examination	'	_
1205 18		2205	9	** Reissue over origina		exces	s of 20 ar	nd						_	
				-			1		Other fe	e (speci	fy) <u>Public</u>	ation Fe	ee; 1 soft copy of issued patent	303	
			SUI	BTOTAL (2)	(\$) 0										
							*Reduc	ed by B	asic Filin	g Fee Pa	aid SUBTOTAL (3) (\$) 10	98	ا		
**or number previously paid, if greater; For Reissues, see above							[
COURSETED BY															

Registration No. Name (Print/Type) Michael A. Patane 42,982 215-665-2000 August 10, 2004 Signature

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.